## PATENT APPLICATION FEE DETERMINATION

Effective October 1, 2003

Application or Docket Number

MR2045-449

| CLAIMS AS FILED - PART I (Column 1) (Column 2)   |                            |             |                                 |              |                                   |              |                  |         | SMALL ENTITY TYPE  |                        | OR      | OTHER THAN<br>OR SMALL ENTITY |                        |
|--|----------------------------|-------------|---------------------------------|--------------|-----------------------------------|--------------|------------------|---------|--------------------|------------------------|---------|-------------------------------|------------------------|
| TOTAL CLAIMS   |                            |             |                                 | 9            |                                   |              |                  | -<br> - | RATE               | FEE                    | 7       | RATE                          | FEE                    |
| FOR  |                            |             |                                 | NUMBER FILED |                                   | NUME         | ER EXTRA         |         | BASIC FEI          | +                      | OR      | BASIC FEE                     |                        |
| TOTAL CHARGEABLE CLAIMS  |                            |             |                                 | 9 minus 20=  |                                   | . &          |                  |         | X\$ 9=             | -                      | OR      | X\$18=                        |                        |
| INDEPENDENT CLAIMS   |                            |             |                                 | 2 minus 3 =  |                                   | 8            |                  | 1       | X43=               | -                      | OR      | X86=                          |                        |
| MULTIPLE DEPENDENT CLAIM PRESEN  |                            |             |                                 |              | ·                                 |              |                  |         | +145=              | _                      | OR      | +290=                         |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2   |                            |             |                                 |              |                                   |              |                  |         | TOTAL              | 385                    | OR      | TOTAL                         |                        |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)   |                            |             |                                 |              |                                   |              |                  |         | SMALL              | ENTITY                 | OR      | OTHER<br>SMALL                |                        |
| <b>AMENDMENT A</b>   |                            | REM.<br>AF  | AIMS<br>AINING<br>TER<br>IDMENT |              | HIGHI<br>NUME<br>PREVIO<br>PAID I | BER          | PRESENT<br>EXTRA |         | RATE               | ADDI-<br>TIONAL<br>FEE |         | RATE                          | ADDI-<br>TIONAL<br>FEE |
|  | Total                      | . 「         |                                 | Minus        | 20                                | 0            | = 0              |         | X\$ 9=             |                        | OR      | X\$18=                        |                        |
|  | Independent                | · )         | N OF M                          | Minus        | DEDENIDENT                        | <u> </u>     | = 0              |         | X43=               |                        | OR      | X86=                          | ·                      |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |                            |             |                                 |              |                                   |              |                  |         | +145=              |                        | OR      | +290=                         |                        |
|  |                            |             |                                 |              |                                   |              |                  |         | TOTAL<br>DDIT. FEE |                        | OR      | TOTAL<br>ADDIT. FEE           |                        |
|  |                            |             | ມກາກ 1)                         |              | (Colum                            |              | (Column 3)       |         |                    |                        |         |                               |                        |
| AMENDMENT B  |                            | REM/        | AIMS<br>AINING<br>TER<br>DMENT  |              | HIGHE<br>NUME<br>PREVIO<br>PAID F | BER<br>JUSLY | PRESENT<br>EXTRA |         | RATE               | ADDI-<br>TIONAL<br>FEE |         | RATE                          | ADDI-<br>TIONAL<br>FEE |
|  | Total                      | •           |                                 | Minus        | **                                |              | =                |         | X\$ 9=             |                        | OR      | X\$18=                        |                        |
| AME  | Independent<br>FIRST PRESE | •<br>NTATIO | NOE MI                          | Minus        | DEPENDENT                         | CLAIN        | -                | I       | X43=               |                        | OR      | X86=                          |                        |
|  | , wo theor                 |             | 14 01 1110                      |              | DE CHOCK                          |              |                  | 1       | +145=              |                        | OR      | +290=                         |                        |
|  | 7                          |             |                                 |              |                                   |              |                  |         | TOTAL<br>DDIT. FEE |                        | OR ,    | TOTAL<br>ADDIT. FEE           |                        |
|  |                            |             | mn 1)                           | ,            | (Colum                            |              | (Column 3)       |         |                    |                        |         |                               |                        |
| AMENDMENT C  |                            | REMA<br>AF  | UMS<br>UNING<br>TER<br>DMENT    | •            | HIGHE<br>NUMB<br>PREVIO<br>PAID F | ER<br>USLY   | PRESENT<br>EXTRA |         | RATE               | ADDI-<br>TIONAL<br>FEE |         | RATE                          | ADDI-<br>TIONAL<br>FEE |
|  | Total                      | •           |                                 | Minus        | **                                |              | <b>-</b> .       |         | X\$ 9=             |                        | OR      | X\$18=                        |                        |
|  | Independent                | *           |                                 | Minus        | ***                               |              | 2                |         | X43=               |                        | OR      | X86=                          |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |                            |             |                                 |              |                                   |              |                  |         |                    |                        | 1       |                               | · ·                    |
| • If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  • If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  • If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  • Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  • Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." |                            |             |                                 |              |                                   |              |                  |         |                    |                        |         |                               | :                      |
|  | he *Highest Num            | ber Previ   | ously Paid                      | For (Total   | al or Independer                  | nt) is the   | highest number   | r foun  | d in the app       | ropriate box           | in colu | ı <b>mn 1.</b>                |                        |